

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date:: 12/18/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title :: COMPOST TEA APPARATUS AND METHODS

Attorney Docket Number:: 470049.401

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency?:: No

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Leon  
Middle Name:: R.  
Family Name:: Hussey  
Name Suffix:: III  
City of Residence:: Redmond  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 12323 180th Avenue Northeast  
City of mailing address:: Redmond  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98052

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Bill  
Middle Name:: W.  
Family Name:: Gebhardt  
Name Suffix::  
City of Residence:: Redmond  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 11316 224th Avenue Northeast  
City of mailing address:: Redmond  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98053

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
----------------------------------	--	--------------

**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	

242545\_1 [9/19/01]